

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
**10/049801**

APPLICANT(S)

FILING DATE  
**07 AUG 2002**

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			/			
2			/			
3			/			
4			/			
5			/			
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49						
50						
TOTAL IND.			3			
TOTAL DEP.			7			
TOTAL CLAIMS						

*	IND.	DEP.	*	IND.	DEP.	*
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